Revision:

HCFA-PM-91-4

August 1991

(BPD)

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

Page 1

OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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State:	Nebraska	 

## **INCOME ELIGIBILITY LEVELS**

- A. MANDATORY CATEGORICALLY NEEDY
  - I. AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:

Family Size	Need Standard	Payment Standard	Maximum Payment Amounts
1	222	222	222
2	293	·· 293	293 ·
3	364	364	364
4	435	435	435
5	506	506	506
6	577	577	577
7	648	648	648
8	719	719	719
9	790	790	790
10	861	- 861	861

2. For pregnant women and infants under Section 1902(a)(10)(i)(IV) of the Act (women during pregnancy and infants under one year of age) the income eligibility level is 150 percent of the Federal Poverty level (as revised annually in the Federal Register) for the size family involved.

TN No. MS-95-10

Supersedes

Approval Date DEC 1 4 1995 Effective Date JUL 0 1,1995

TN No. MS-93-5

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY	AC	ΛC
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State:	Nebraska
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## INCOME ELIGIBILITY LEVELS

- MANDATORY CATEGORICALLY NEEDY (Continued)
  - 3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.
  - 4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

TN No. MS-92-3 Approval Date APR 0 8 1992 JAN 8 1 1982 Supersedes Effective Date

TN No. MS-91-24

Revisi		'A-PM-91-4 UST 1991	(BPD)	SUPPLEMENT 1 TO ATTACHMENT 2.6-A Page 3 OMB No.: 0938-
	S'	rate plan uni	ER TITLE	KIX OF THE SOCIAL SECURITY ACT
	Stat	e: Nebra	ska	
		INCOME	ELIGIBIL:	ITY LEVELS (Continued)
	TIONAL C		NEEDY GRO	UPS WITH INCOMES RELATED TO FEDERAL
1.	Pregnan	t Women and	Infants	·
.•	pregnan	t women and	infants un	come eligibility for optional groups of der the provisions of sections (2(1)(2) of the Act are as follows:
	Based of	n per s than 133 p	cent of th ercent and	e official Federal income poverty level no more than 185 percent).
		Family Siz	<u>e</u>	Income Level
		1		\$
				\$
		3		\$
		4		\$
	•			\$
				•
		•		
		•		
				•

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Effective Date HCFA ID: 7985E

TN No. MS-91-24
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SUPPLEMENT 1 TO ATTACHMENT 2.6-A

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OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nebraska

(Reserved)

Approval Date

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Revision:

HCFA-PM-92-1 (MB)

FEBRUARY 1992

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nebraska

INCOME ELIGIBILITY LEVELS (Continued)

## 3. Aged and Disabled Individuals

For aged and disabled individuals described in Section 1902(m)(1) of the Act, the income eligibility level is 100 percent of the Federal Poverty level (as revised annually in the Federal Register) for the size family involved.

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	STATE PLAN	UNDER TITLE X	IX OF THE SOCIAL SECURITY ACT	
	State:	Nebraska		
	INC	OME ELIGIBILI	TY LEVELS (Continued)	
C. QUALI		BENEFICIARIES	WITH INCOMES RELATED TO FEDERAL POV	/ERTY
Medic	evels for deter are beneficiari ct_are as follo	es under the	e eligibility for groups of qualified provisions of section 1905(p)(2)(A)	ed of
1. <u>NON-S</u>	ECTION 1902(f)	<u>STATES</u>		
a. Based level		ng percent of	f the official Federal income povert	<b>:</b> Y
Efr.	Jan. 1, 1989:	<u>/x</u> / 85 percen	nt percent (no more than	in 100)
Eff.	Jan. 1, 1990:	<u>/x/</u> 90 percen	nt percent (no more than	n 100)
Eff.	Jan. 1, 1991:	100 percent		
Eff.	Jan. 1, 1992:	100 percent		
b. Level	<b>8:</b>			
the inc	ome eligibility ised annually	7 level is 100	es described in 1905(p)(1) of the Ad O percent of the Federal Poverty Lev 1 Register) for the size family	et, vel
	•			
•				
TN No. MS- Supersede	Annroy	al Date	Effective Date	
TH No. MS-	-91-24		HCFA ID: 7985E	<del></del>

HCFA-PM-91-4 SUPPLEMENT 1 TO ATTACHMENT 2.6-1 (BPD) Revision: Page 7 AUGUST 1991 OMB No.: 0938-STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Nebraska INCOME ELIGIBILITY LEVELS (Continued) QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL SECTION 1902(f) STATES WHICH AS OF JANUARY 1, 1989 USED INCOME STANDARDS MORE RESTRICTIVE THAN SSI Based on the following percent of the official Federal income poverty Eff. Jan. 1, 1989: // 80 percent // \_\_\_\_\_ percent (no more than 100) Eff. Jan. 1, 1990: // 85 percent // \_\_\_\_\_ percent (no more than 100) Eff. Jan. 1, 1991: // 95 percent // \_\_\_\_\_ percent (no more than 100; Eff. Jan. 1, 1992: 100 percent b. Levels: Income Levels In determining the income of an individual who is entitled to monthly

In determining the income of an individual who is entitled to monthly insurance benefits under title II for a transition month (defined in the following paragraph) in a year, the income shall not include any anounts attributable to an increase in the level of monthly insurance benefits payable under such title which have occurred pursuant to section 215(i) for benefits payable for months beginning with December of the previous

Under the preceding paragraph, the term "transition month" means each month in a year through the month following the month in which the annual revision of the official poverty line is published.

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AUGUST 1991 Page 8 OMB No.: 0938-STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Nebraska State: ' INCOME LEVELS (Continued) D. MEDICALLY NEEDY X Applicable to all groups. Applicable to all groups except those specified below. Excepted group income levels are also listed on an attached page 3. (2) (3) Family Net income level Amount by which Net income level Amount by which Column (4) protected for Column (2) for persons maintenance for exceeds limits living in exceeds limits \_\_ 6 \_\_\_months specified in rural areas for specified in 42 CFR 42 CFR \_\_months  $435.1007^{1/2}$ // urban only  $435.1007^{\frac{1}{2}}$  $\sqrt{X}$  urban & rural 2,352 2,352 2,952 3,504 \_For each additional person, The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

(BPD)

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

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IN NO			HCFA ID:	7985E	

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Nebraska
	INCOME_LEVELS (Continued)

## D. MEDICALLY NEEDY

(1)		(2)	(3)	(4)	(5)
Family Size	promain 6	income level otected for tenance for months	Amount by which Column (2) exceeds limits specified in 42 CFR 435.10072/	Net income level for persons living in rural areas for months	Amount by which Column (4) exceeds limits specified in 42 CFR 435.10071/
<u>/X</u> /	urba	n & rural			
5	\$	4,050	\$	<u> </u>	<u> </u>
66	\$	4,650	<b>\$</b>	\$	<b>\$</b>
7	<u> </u>	5,202	<u> </u>	<u> </u>	<b>S</b>
8	<u> </u>	5,802	s	<u> </u>	<b>\$</b>
9	\$	6,354	<b>.</b>	<b>S</b>	<u> </u>
10	\$	6,900	<u> </u>	<u> </u>	<u> </u>
For each additional person, add:	h \$	· 546	· \$	·	<b>.</b>

 $<sup>^{\</sup>underline{1}\prime}$  The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

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Supersedes page Approval Date TN No.		Effective	Date
IN NO.		HCFA ID:	7985E